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PTO/SB/21 (08-00)

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/615,473	
	Filing Date	07/13/2000	
	First Named Inventor	Marcus Escobosa	
	Group Art Unit	2735	
	Examiner Name	unassigned	
Total Number of Pages in This Submission	4	Attorney Docket Number	81230.56US1

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <ul style="list-style-type: none">- Form 1449- copies of cited references- return postcard
Remarks		RECEIVED MAR 29 2002 Technology Center 2600

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Customer No. 25541 By: Gary R. Jarosik
Signature	
Date	March 14, 2002

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 03/14/2002	
Typed or printed name	Lisa Lyle
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#6 Supp IDS w/refs
Bmw 4-1-02

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Escobosa et al.)	Examiner:	not assigned
Serial No.:	09/615,473)	Group Art Unit:	2735
Filed:	07/13/2000)	Docket No.:	81230.56US1
Title:	CUSTOMIZABLE AND)		
	UPGRADABLE DEVICES AND)		
	METHODS RELATED THERETO))		

SECOND SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT
(37 CFR §1.97(b)(3))

Commissioner for Patents
Washington, D.C. 20231

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Dear Sir:

With regard to the above-identified patent application, the items of information listed on the enclosed Form 1449 are brought to the attention of the Examiner.

This statement should be considered because it is being submitted before the mailing date of the first Office Action, therefore, no fee is required.

In accordance with 37 C.F.R. §1.98(2)(i), a copy of each foreign patent listed on Form 1449 is enclosed herewith.

In accordance with 37 C.F.R. §1.104, no representation is made that a reference is "prior art" within the meaning of 35 U.S.C. §§102 and 103 and Applicant reserves the right, pursuant to 37 C.F.R. §1.131 or otherwise, to establish that the reference(s) are

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By: Lisa Lyle
Lisa Lyle

not "prior art." Moreover, Applicant does not represent that a reference has been thoroughly reviewed or that any relevance of any portion of a reference is intended.

Consideration of the items listed is respectfully requested. Pursuant to the provisions of M.P.E.P. 609, it is requested that the Examiner return a copy of the attached Form 1449, marked as being considered and initialed by the Examiner, to the undersigned with the next official communication.

While it is not believed that any fees are required, the Commissioner is hereby authorized to charge any fees or credit any overpayment to deposit account number 011,156.

Respectfully submitted,

Date: March 14, 2002

By: 

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